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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
53116/4355

I hereby certify that this document is being transmitted to the U.S. Patent and Trademark Office via facsimile to fax no. 730-872-9306 on this 24th day of February, 2004

Donald A. Kasten
DANIEL S KASTEN

In re Application of
Curtiss et al.Application Number
09/580,539 Filed
4/28/2000For
Regulated Antigen Delivery SystemGroup Art Unit
1645 Examiner
Navarro, A.M.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(e)(2))	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-0823
I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor

<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
<input checked="" type="checkbox"/> attorney or agent of record.
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

2/24/2004
Date

Donald A. Kasten
Signature

Daniel S. Kasten
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

2271941

PAGE 6/16 * RCVD AT 2/24/2004 4:06:27 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID:314 552 7000 * DURATION (mm:ss):04:52

PTO/SB/31 (02-01)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 53116/4355			
<p>I hereby certify that this correspondence is being transmitted to the U.S. Patent and Trademark Office via facsimile to fax no. <u>703-872-6306 on February 24, 2004</u></p> <p><u>Signature</u> </p> <p>Typed or printed name <u>Daniel S. Kasten</u></p>		<p>In re Application of Curtiss et al.</p> <p>Application Number 09/560,539</p> <p>For Regulated Antigen Delivery System</p> <table border="1"> <tr> <td>Group Art Unit 1645</td> <td>Examiner Navarro, A.M.</td> </tr> </table>		Group Art Unit 1645	Examiner Navarro, A.M.
Group Art Unit 1645	Examiner Navarro, A.M.				

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00.

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 28-0823. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

applicant/inventor.

assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____



Signature

Daniel S. Kasten
Typed or printed name

February 24, 2004
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, P.O. Box 1400, Alexandria, VA 22313-1450.

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